

ABSTRACT OF THE DISCLOSURE

A surgical instrument includes a tubular member having a distal end and a proximal end, for forming a first axis, a partition member disposed in the tubular member in a direction along the axis of the tubular member, for partitioning the inside of the tubular member, a first shaft disposed in a first channel formed by the partition member such that the first shaft can move in both forward and backward directions, a second shaft disposed in a second channel formed by the partition member such that the second shaft can move in both forward and backward directions, an end effector including a pair of jaws, a base member connected to the second shaft, for supporting the end effector, a supporting pin for pivotably supporting the base member to mount the end effector on the distal end of the tubular member, a first connection member connected to the jaws, the first connection member being movable in both forward and backward directions in the base member to open and close the jaws, a second connection member for connecting the first connection member with the first shaft, the second connection member being movable through a joint formed by the supporting pin, a first operation control portion connected to the proximal end of the first shaft, for manipulating the end effector via the first shaft, and a

second operation control portion connected to the proximal end of the second shaft, the second operation control portion moving the second shaft in both forward and backward directions to control the angle of the joint.